I. Name of Lobbyist(s) Meredith Hatfield

## STATE OF NEW HAMPSHIRE

2019 Statement of Income and Expenses

for LOBBYISTS (RSA Chapter 15)

## RECEIVED

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APR 23 2019 NEW HAMPSHIRE DEPARTMENT OF STATE

II. Name of lobbyist's	s partnership, firm oi	corporation, if a	ny:		
Conservation Law	Foundation				
(Nam	ne of partnership, firm or	corporation)			<del> </del>
27 North Main St	treet	Concord	N	н .	03301-4930
Business Address: (Str	rect)	(Town/City)	(St	ate)	(Zip Code)
603) 225-3060	(	)		mhatfield@e	clf.org
(Telephone)		(Fax)			
III. This statement co reportable expense tr				OR you may fil	e a separate report for
All reportable trans	sactions occurring in the	ne months prior to	the reporting date re	lative to the fol	lowing client:
	aw Foundation			·	
OR	(Full Name of Client as	it appears on the Lo	bbyist Registration Fo	rm)	
		(including the lob	byist's family), or th	ne lobbying firn	n listed below which are
IV. Date of Report	April 24, 2019 🔀		July 31, 20	19 🗆	
Reports cover: activi	ity from date of registrat	ion to 3/31/19	activity from 4/1/19	9 to 6/30/19	
	October 30, 2019 [ activity from 7/1/19 to 9/		January 29. activity from 10/1/		
V. There have been If this box is checked, of Concord, NH 03301.					
VI. Check if additions	al reports are attache	ed:			
	ed fees or made expen		ile Addendum A– F	Fees and Expens	ses
☐ If you have paid an Expense Reimburseme	n honorarium or reimb	ursed expenses, yo	ou must file Addend	um B- Report	of Honorariums or
•		de political contrib	utions, you must file	Addendum C	- Political Contributions
and complete to the beautiful (Signature of lobbyist)	SA 15-B, RSA 14-C a st of my knowledge ar	nd RSA 664 and h	·	m that the foreg	oing information is true
Meredith Hatfield	ct)				
(Print Name of lobbyi	S( <i>)</i>				

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## STATE OF NEW HAMPSHIRE

# Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ N/A
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ <u>N/A</u>
f) Total of all expenses year to date	ń s <u>N/A</u>
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
N/A	\$
	\$
·	\$
	\$
	\$
	\$ .
	***************************************
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	m that the foregoing information
(Sizestan of labbrida)	4/22/19
(Signature of lobbyist)	(Date)